

FY2010 Application
Poetry Out Loud (POL)
Application Deadline: September 22, 2009

THIS FORM MUST BE TYPED. No handwritten applications will be accepted. Please refer to the guidelines and instructions.

APPLICANT INFO	School Name
US Congressional District _____	Street Address
KY Senate District _____	City State Zip Code - Plus 4 County
KY House District _____	Principal Salutation Principal Name <input type="checkbox"/> Miss <input type="checkbox"/> Ms. <input type="checkbox"/> Mrs. <input type="checkbox"/> Mr. <input type="checkbox"/> Dr.
To lookup district info, use www.vote-smart.org or Call your County Clerk's office.	School Phone # Second Phone # FAX #
	E-Mail Address Web Address
BOARD OF EDUCATION INFO	School District Name:
	Superintendent or Chief Executive Officer Name: Title:
	Street Address
	City State Zip Code - Plus 4 County
	Phone # Fax # E-Mail
PROPOSAL	Project Title (short phrase)
# of Individuals who will benefit:	Project Begin Date Project End Date Amount Requested
Youth	Contact Person Salutation: Total KAC funding Last Year <input type="checkbox"/> Miss <input type="checkbox"/> Ms. <input type="checkbox"/> Mrs. <input type="checkbox"/> Mr. <input type="checkbox"/> Dr. (all categories):
Adult	Phone # Contact Teacher Name & Title
	Fax # Contact Teacher E-Mail
KAC Staff Use ONLY	
FY: 2010	APP #: _____ CLIST #: _____
App Status: _____	App Institution: _____ App Discipline: _____
Grantee Race: _____	Project Disc: _____ Activity: _____
Project Race: _____	AIE Percent: _____ AIE Description: _____
Grant Program: POL	# Youth Benefit: _____ Application Date: _____

Check only one <input type="checkbox"/> that best represents 50% or more of staff or board or membership (not audience)	Grantee Race / Ethnicity: <input type="checkbox"/> American Indian/Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Native Hawaiian/Pacific Islander <input type="checkbox"/> Black/African American <input type="checkbox"/> Hispanic/Latino <input type="checkbox"/> White
Check only one <input type="checkbox"/> that best represents whom the grant or activity is intended to involve.	Activity Race / Ethnicity: <input type="checkbox"/> NO Single Group <input type="checkbox"/> Black / African American Individuals <input type="checkbox"/> Asian Individuals <input type="checkbox"/> American Indian / Alaska Native Individuals <input type="checkbox"/> Hispanic / Latino Individuals <input type="checkbox"/> White Individuals <input type="checkbox"/> Native Hawaiian / Pacific Islander Individuals
Applicant Status	Please choose ONE : _____ 02 Organization - Non-Profit 07 Government - County 04 Government - Federal 08 Government - Municipal 05 Government - State
Applicant Institution	Please choose ONE : _____ 23 Secondary School 48 School of the Arts

Poetry Out Loud 2009-2010 Worksheet

Estimated number of students you anticipate participating in POL from your school: _____

Number of classes that will be participating from your school: _____

Grade levels participating (must be at least three): _____

Do you have an artist in mind with whom you would like to work? ☐ Yes ☐ No

If so, who? _____

Proposed Funding Requested

Schools may apply for funding in any or all of the three categories listed below. All funding requests will be reviewed by the Kentucky Arts Council and schools accepted into the Poetry Out Loud program may receive a funding level different than that which they requested.

Category 1: Request for Artist Fees

Schools are required to bring in an artist from the Kentucky Arts Council's Arts Education Roster to work with participating classes. Artists will be paid \$200 for a four-class day: the artist's fee cannot exceed this amount. This fee includes mileage and expenses, however, schools may use their own funding to supplement expenses. Schools may apply to bring an artist into the school for up to four days. Artists may work with each class only one time.

Please check one.

- ☐ \$200: One day (up to four classes per day)
- ☐ \$400: Two days (up to four classes per day)
- ☐ \$600: Three days (up to four classes per day)
- ☐ \$800: Four days (up to four classes per day)

Category 2: Request for additional artist transportation expenses

If the only available roster artist for your school must travel more than two hours, one way, to reach your school, you may apply for additional artist transportation expenses. Please provide a brief breakdown of costs, e.g. mileage, lodging, etc.

Amount of additional funds requested: _____

Funding will be used to pay for: _____

Category 3: Request for transportation funds to attend state finals in Frankfort

Schools may request transportation funding to help get their school champion to the state finals. This may include mileage and hotel rooms for the student and a parent or chaperone if the travel time to Frankfort exceeds two hours. Schools may also apply for funding to pay for a school bus to take the students to the state finals.

Please indicate below the amount of transportation funding you are requesting and provide a brief explanation of how this funding will be used, giving estimated costs whenever possible. *For example: Kentucky High School is three hours from Frankfort. We request \$100 for mileage and \$75 for a hotel room for our school champion and his/her parent.*

If you are planning to use this funding to bring students to the state finals, please give an estimate of the number of students.

Amount of transportation funds requested: \$ _____

Funding will be used to pay for: _____

Total Amount of Funding Requested (add categories 1, 2 and 3): \$ _____

Instructions for Completing Application Narrative

To assist panelists in reading your application, duplicate the number and heading of each *Introductory* section and performance expectation (e.g. Planning and Implementation) before your response to that item. Use bullets where indicated. Place the school's name and the words "Poetry Out Loud" in the upper right-hand corner of each page.

Narrative Outline

Please respond to the Introduction and each of the Performance Expectations on a total of not more than four pages. Include complete information on each bulleted item, in the order below, when writing your narrative. Each performance expectation will be scored by the panel.

Introduction

Description of your School (Limit to a total of 15 single spaced lines)

- ***Briefly*** describe your school, including number of students, accomplishments.
- Provide a list with the names of the teachers, subject matter taught, grade level taught and number of students per class/grade level that will be participating in this program.

Performance Expectations

Your application will be reviewed using the following performance expectations:

1. Planning and Implementation (45%)

- Describe how you expect your school will benefit from this program, including any specific goals you may have (e.g. fostering creativity, helping to prepare for state arts accountability requirements, addressing the program of studies, etc.)
- The program incorporates a series of competitions, classroom contests and a school-wide competition (must be administered by the school) to select the POL school champion. Briefly describe how your school will fulfill this program requirement.
- Classroom teachers must work in partnership with an artist on this program and commit class time in addition to the artist day(s) in meeting the program goals. Describe how your teachers will benefit from working in partnership with a teaching artist.
- Describe strategies for promoting awareness of the value of arts education and arts in education in both your school and your community.

2. Assessment and Feedback (35%)

Note An important goal of the residency is long-term impact on all participants. To assess that impact, you will gather evidence throughout the planning and implementation of the program to determine progress, and to learn about and improve upon the work being done. Effective assessment will include a combination of quantitative (measured by quantity or amount) and qualitative (measured by quality or kind) measures.

Below are several examples of assessment measures that can be used when answering the questions in this section.

- ❖ *Measurement of student engagement in the program may include anecdotal observation, photo documentation, student journaling, etc.*
- ❖ *Measurement of teacher and parent involvement in the creative process and measurement of their increased ability to use the arts to support student learning may include:*
 - *quantitative data of the number of parents who came into the classroom, attended events, or responded to requests for at-home involvement, etc.*
 - *qualitative measurement such as interviews, anecdotal observation, open-ended surveys, etc.*
- ❖ *Documentation of activities to promote awareness of the value of arts education and arts in education may include examples of media coverage, letters home to parents, etc.*

Utilizing the examples above:

- Describe the process and tools you will use to gather ongoing data about the impact of the Poetry Out Loud program on all participants (e.g. increased participation, abilities, and awareness of the value of arts education and arts in education.)
- Note: If your application is approved for funding, this data should be included in your Final Report, which is prepared by the applicant and is due by May 14, 2010.
- Describe how educators will use knowledge gained during the project to utilize the arts in instruction after the artist leaves.

3. Access (20%)

- Describe your strategies for serving persons with disabilities (e.g. mobility, visual, hearing, speech and learning disabilities) among students, teachers, artists, parents and general public involved with your this project.
- Describe your school's role in the community.
- If your school has previously participated in or applied to the Poetry Out Loud Program, please list the years you applied or participated.

Application Checklist

Include this application checklist as the first page of your application package

Your application is not complete and will not be forwarded to the panel for review if it does not include the following mandatory information:

One original of the following, in this order:

- ☐ Poetry Out Loud Grant Application and narrative, worksheet, and signature page.

If you would like acknowledgement of receipt of your application please provide an email address:

Completed application forms ***must be received*** by 4:30 p.m. E.D.T on **September 22, 2009**.
 Faxed or e-mailed applications will not be accepted.

Application Signatures

I certify that I am legally authorized to submit this application on behalf of the District and that the foregoing statements and enclosures are true and complete to the best of my knowledge. The District guarantees that the artist will be paid for their residency no later than 10-15 business days after the completion of his/her work.

District Superintendent or Chief Executive Officer <i>All signatures must be in RED ink.</i>	_____	Date	_____
	<i>Signature</i>		
	_____	Title	_____
	<i>Please Type Name</i>		
School Principal <i>All signatures must be in RED ink.</i>	_____	Date	_____
	<i>Signature</i>		
	_____	Title	_____
	<i>Please Type Name</i>		
Contact Teacher <i>All signatures must be in RED ink.</i>	_____	Date	_____
	<i>Signature</i>		
	_____	Title	_____
	<i>Please Type Name</i>		

Mailing Address for Completed Application

Kentucky Arts Council ♦ 21st Floor, Capital Plaza Tower ♦ 500 Mero Street ♦ Frankfort, KY 40601-1987